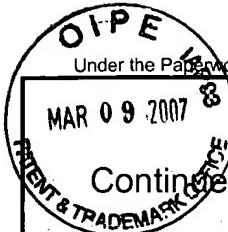


RCE  
TS

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PTO/SB/30 (09-04)

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**Request  
for  
Continued Examination (RCE)  
Transmittal**

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number 09/866,544
	Filing Date May 25, 2001
	First Named Inventor Brent C. Abram, et al.
	Art Unit 3693
	Examiner Name Patel, Jagdish
	Attorney Docket Number PELK0002/MRK

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

- 1. Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- a.  Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i.  Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_

ii.  Other \_\_\_\_\_

- b.  Enclosed

i.  Amendment/Reply

iii.  Information Disclosure Statement (IDS)

ii.  Affidavit(s)/Declaration(s)

iv.  Other \_\_\_\_\_

**2. Miscellaneous**

- a.  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)

- b.  Other \_\_\_\_\_

**3. Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a.  The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50,1574. I have enclosed a duplicate copy of this sheet.

i.  RCE fee required under 37 CFR 1.17(e)

ii.  Extension of time fee (37 CFR 1.136 and 1.17)

iii.  Other Charge any underpayment.

- b.  Check in the amount of \$ 395.00 is enclosed

- c.  Payment by credit card (Form PTO-2038 enclosed)

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Signature		Date	March 5, 2007
Name (Print/Type)	Marilyn R. Khorsandi	Registration No.	45,744

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

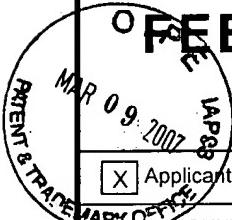
Signature		Date	March 5, 2007
Name (Print/Type)	Alexandra Allison	Registration No.	45,744

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

03/12/2007 RHEBAHT 00000049 09866544

01 FC:2801



# FEE TRANSMITTAL For FY 2007

Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 395.00)

#### Complete if Known

Application Number	09/866,544
Filing Date	May 25, 2001
First Named Inventor	Brent C. Abraham
Examiner Name	Patel, Jagdish

Art Unit 3693

Attorney Docket No. PELK0002/MRK

#### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 501574 Deposit Account Name: Khorsandi Patent Law Group, ALC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charges fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

#### FEE CALCULATION

##### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	\$ .00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

##### 2. EXCESS CLAIM FEES

###### Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
132	- 132 (HP) = 0	x \$ .00	= \$ 0.00		\$ 0.00

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
9	- 9 (HP) = 0	x \$ .00	= \$ 0.00

HP = highest number of independent claims paid for, if greater than 3

##### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)  
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = 0	/50 = 0	(round up to a whole number) x \$250.00	= \$ 0.00	Fees Paid(\$)

##### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Request for Continued Examination Fee

395.00

#### SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 45744	Telephone (626) 796-2856
Name (Print/Type)	Marilyn R. Khorsandi		Date March 5, 2007